U.S. Department of Transportation Federal Motor Carrier Safety Administration

Combined Motor Carrier Identification Report and HM Permit Application

REASON FOR FILING (Check Only One)

NEW APPLICATION	BIENNIAL UPD	ATE OR (CHANGES []оит	OF BUSIN	NESS NOT	TFICATIO	N [REAF	PPLICAT	ION (A	AFTER	REVOC	ATION OF	NEW EN	ΓRANT)
1. NAME OF MOTOR CARRIER						2. TRAD	E OR D.B	.A. (DOIN	NG BUS	SINESS A	AS) NA	AME				
3. PRINCIPAL STREET ADDRES	5. MAILING ADDRESS (P O BOX) 6. MAILING CITY															
7. STATE/PROVINCE	8. ZIP CODE+	4 9	COLONIA (MEXICO ONLY)			10. STATE/PROVINCE			11. ZIP CODE+4		+4	12. COLONIA (MEXICO ONLY)		NLY)		
13. PRINCIPAL BUSINESS PHO	LLULAR F	LULAR PHONE NUMBER 15. PRINCIPAL BUSINI					INESS F	ESS FAX NUMBER								
16. USDOT NO.	17. MC OR MX NO. 18. DUN & BRADSTREET NO.						19. IRS/TAX ID NO. EIN# SSN#					20. INTERNET E-MAIL ADDRESS				
21. COMPANY OPERATION (Cir	rcle all that apply)		•													
A. Interstate Carrier	B. Intrastate Hazr	nat Carrie	er C. Intrasta	te Non-	Hazmat C	arrier	D. Inters	tate Ship	per	E. Ir	ıtrasta	te Ship	per	F. Vehic	le Registra	nt Only
22. CARRIER MILEAGE (to near	est 10,000 miles f	or Last C	alendar Year)		Y	/EAR			•				•			
23. OPERATION CLASSIFICATI A. Authorized For-Hire B. Exempt For-Hire C. Private Property	D. Pr E. Pr	ivate Pas ivate Pas	sengers (Busines sengers (Non-Bus		Н	G. U. S Ma I. Federal State Gov	Governme	nt		K.		Governi Tribe	ment			
C. Private Property F. Migrant 24. CARGO CLASSIFICATIONS (Circle All that Apply) A. GENERAL FREIGHT B. HOUSEHOLD GOODS BEAMS, LUMBER C. METAL; SHEETS; COILS; ROLLS B. MOTOR VEHICLES COILS; ROLLS B. MACHINERY, B. DRIVE AWAY/TOWAWAY F. Migrant J. FRESH PRODUCE K. LIQUIDS/GASES L. INTERMODAL CONT. M. PASSENGERS M. PASSENGERS O. LIVESTOCK						Q. COAR. ME S. GAI T. U.S	P. GRAIN, FEED, HAY Q. COAL/COKE W. REFRIGERATED FOOD R. MEAT S. GARBAGE, REFUSE, TRASH T. U.S. MAIL U. CHEMICALS V. COMMODITIES DRY BULK W. REFRIGERATED FOOD X. BEVERAGES BB. CONSTRUCTION CC. WATER WELL DD. OTHER AA. FARM SUPPLIES									
25. HAZARDOUS MATERIALS (C S A. DIV 1.1 C S B. DIV 1.2 C S C. DIV 1.3 C S D. DIV 1.4 C S E. DIV 1.5 C S F. DIV 1.6 C S G. DIV 2.1 C S H. DIV 2.1 LPG C S J. DIV 2.2	B NB C	S K L N N O O P P G R S S S S S S S S S S S S S S S S S S	Circle All that Appl C. DIV 2.2A (Amm DIV 2.3A II. DIV 2.3B II. DIV 2.3C D. DIV 2.3D C. Class 3 C. Class 3A C. Class 3B C. COMB LIQ DIV 4.1	onia)		S - SH C C C C C C C C C C C C C C C C C C C	 U. DI V. DI W. DI X. DI Y. DI Z. DI AA. DI BB. DI CC. DI 	V 4.3 V 5.1 V 5.2 V 6.2 V 6.1A	B B B B B B		000000000	S	E. HRC F. CLA G. CLA IH. CLA J. ELE K. INFE L. MAF	CQ SS 8 SS 8A SS 8B SS 9 VATED TE ECTIOUS RINE POLI ARDOUS ARDOUS	LUTANTS SUB (RQ)	B NB B NB
26. NUMBER OF VEHICLES THA	AT CAN BE OPE	RATED IN	N THE U.S.													
			Hazmat Cargo Tank Trucks				School Bi Motor Coach Number of vel							Van Limousine assengers (including the driver) below		
Trucks	Tractors			Tan	K Trullers		1-8	9-15	16+	16-	+	1-8	9-15	1-8	9-15	16+
OWNED TERM LEASED																
TRIP LEASED																
27. DRIVER INFORMATION	•		INTERSTATE			INTRASTA	ATÉ.		TO	TAL DRI	VERS	;		TOTAL C	DL DRIVE	RS
Within 100-Mile Ra	dius															
Beyond 100-Mile Ra																
28. IS YOUR U.S. DOT NUMBER If Yes, enter your U.S. DOT N							R CARRI	ER SAFE	TY ADI	MINISTR	ATIOI	N?	Yes	1	No	-
29. PLEASE ENTER NAME(S) C 1(Please prin		IETOR(S), OFFICERS OR	PARTI	NERS ANI	D TITLES		SIDENT,			GENEI	RAL PA	RTNER	, LIMITED	PARTNEF	3)

30. WHICH	OF THE FOLLOWIN	IG HAZARDOUS	MATERIAL(S) D	OES YOUR COM	MPANY TRANSP	ORT, CHECK AL	_ THAT APPLY:			
☐ Highway Route Controlled Quantities (HRCQ) of Radioactive materials.										
	☐ More than	n 25 kg (55 poun	ds) of a Division 1	.1, 1.2, or 1.3 ma	iterial or a quantit	y of Division 1.5 r	naterial that requ	ires placarding		
	meeting th	he definition of a	e definition of "ma Hazard Zone A T naterial meeting th	IH material, a ma	terial meeting the	definition of a Ha	zard Zone B TIH	I material in a bu	Ik package (capa	ackage of a material acity greater than 450 n 13,248 L (3,500
		s of compressed 48 L (3,500 gallo		uid methane or lic	quefied natural ga	as with a methane	content of at lea	st 85% in a bulk	packaging that h	nas a capacity greater
31. IF YOU	CHECK QUESTION	30, ARE YOU A	PPLYING FOR C	R RENEWING A	. HM SAFETY PE	RMIT? PLEASE	CHECK ONE:			
		1	□ INITIAL			RENEWAL				
32. IF YOUR	COMPANY DOES	NOT HAVE A U.	S. DOT NUMBEF	R, HOW MANY A	CCIDENTS AS D	EFINED IN 49 CF	R 390.5 HAS YO	OUR COMPANY	HAD IN THE PA	NST 365 DAYS?
	OUR COMPANY CE BPART E?	ERTIFY THEY HA	AVE A SATISFAC	TORY SECURIT	Y PROGRAM IN I	PLACE AS REQU	IRED IN 49 CFR	PART	☐ Yes	□ No
	R COMPANY REQU STION 30?	IRED BY ANY S	TATE(S) TO HAV	'E A PERMIT FO	R ANY OF THE F	HAZARDOUS MA	TERIALS LISTE)	☐ Yes	□ No
35. IF YOUR	R ANSWER TO QUE	ESTION 34 IS YE	S, CHECK THE	STATE(S) IN WH	ICH YOU HAVE ⁻	THE PERMIT.		,		
□ AL	□ AK	□ AR	□ AZ	□ CA	□ СО	□СТ	□ DC	□ DE	□ FL	□ GA
□ HI	□ ID	□ IL	\square IN	□ IA	□ KS	□ KY	□ LA	□ MA	\square MD	□ ME
□ MI	□ MN	□МО	□ MS	\square MT	□ NC	□ ND	□ NE	□ NH	□ NJ	□ NM
\square NV	□ NY	□ OH	□ OK	□ OR	□ PA	□ PR	□ RI	□ SC	□ SD	□ TN
□ TX	□ UT	□ VT	□ VA	□ WA	□ WV	□ WI	□ WY			
inclu Sect stan regu	tion 18 of the Occup dards and requirement	ed to, all applicat ational Safety an ents administered may require mot	ole statutory and r nd Health Act of 19 d by the U.S. Envi	egulatory require 970 ("OSHA State ronmental Protec	ments administer e plan agency"). S tion Agency or a S	red by the U.S. De Such requirement State, local or triba	partment of Labo s also include all ll environmental p	or, or by a State applicable statu orotection agenc	agency operating tory and regulate y. Compliance w	g a plan pursuant to
36. CERTIF	ICATION STATEME	ENT (TO BE COM	MPLETED BY AN	AUTHORIZED C	OFFICIAL)					
l,	(Please print Nar	me)				Carrier Safety Reg n entered on this				Regulations. Under true, correct, and
Signaturo			Date	_		Title				

NOTICE

This collection of information is mandatory and is required by 49 CFR Part 385 and authorized by 49 U.S.C. 504 (1982& Supp. III 1985). The Form MCS-150, Motor Carrier Identification Report, must be filed by all motor carriers operating in interstate or foreign commerce. A new motor carrier must file Form MCS-150 before beginning operations. The Form MCS-150B, combined Motor Carrier Identification Report and HM Safety Permit Application, must be filed by all motor carriers operating in interstate or foreign commerce that carry hazardous materials requiring an HM Safety Permit. This form takes the place of the MCS-150 for carriers required to have an HM Safety Permit. If you are a hazardous materials shipper, but not a motor carrier, you are not required to file this report. This information will be used to identify motor carriers subject to the Federal Motor Carrier Safety and Hazardous Materials regulations. Carriers may voluntarily update information using this report.

Public reporting for this collection of information is estimated to be 26 minutes per response, including the time for reviewing instructions and completing and reviewing the collection of information. All responses to this collection of information are voluntary, and will be provided confidentiality to the extent allowed by law. Not withstanding any other provision of law, no person is required to respond to nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The valid OMB Control Number for this information collection is 2126-0013. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-MBI, U.S. Department of Transportation, Washington, D.C. 20590

NOTE:

All responses to this collection of information are mandatory in accordance with (cite law or regulation, etc), and will be provided confidentiality to the extent allowed by law.

To mail, fold the completed report so that the self addressed postage paid panel is on the outside

INSTRUCTIONS FOR COMPLETING THE COMBINED MOTOR CARRIER IDENTIFICATION REPORT AND HM PERMIT APPLICATION (Please, **Print** or **Type** All Information)

Please, check the appropriate box:

New application - To obtain a U.S. DOT Number to operate in interstate commerce.

Biennial Update or changes – To file the required MCS-150 Biennial update or to file other changes to MCS-150 information.

Out of business notification - To notify FMCSA that you are no longer operating as a motor carrier (complete items 1-20).

Reapplication (after revocation of New Entrant) - To reapply after your U.S. DOT number has been revoked (complete items 1-30). Use assigned U.S. DOT number for item number 16.

- 1. Enter the legal name of the business entity. (i.e., Corporation, partnership, or individual) that owns/controls the motor carrier/shipper operation.
- 2. If the business entity is operating under a name other than that in Block 1. (i.e., "trade name") enter that name. Otherwise, leave blank.
- 3. Enter the principal place of business street address where safety records are kept.
- 4. Enter the city where the principal place of business is located.
- 5. Enter the mailing address if different from the physical address, otherwise leave blank. Also, applies to #6, #10, #11 & #12.
- 6. Enter the city corresponding with the mailing address.
- 7. Enter the two-letter postal abbreviation for the State or the name of the Canadian Province/Territory or Mexican State corresponding with the physical address.
- 8. Enter the zip code + 4 number corresponding with the physical street address.
- 9. If a Mexican motor carrier or shipper, enter the Mexican "colonia" or "barrio" where the physical place of business is located.
- 10. Enter the two-letter postal abbreviation for the State or the name of the Canadian Province/Territory or Mexican State corresponding with the mailing address.
- 11. Enter the zip code + 4 number corresponding with the mailing street address.
- 12. If a Mexican motor carrier or shipper, enter the Mexican "colonia" or "barrio" where the physical place of business is located.
- 13. Enter the telephone number, including area code, of the principal place of business.
- 14. Enter Cellular phone number, including area code, of the principal place of business.
- 15. Enter the fax number, including area code, of the principal place of business.
- 16. Enter the identification number assigned to your motor carrier operation by the U.S. Department of Transportation, if known.
- 17. Enter the motor carrier "MC" or "MX" number under which the Federal Motor Carrier Safety Administration (FMCSA), or Interstate Commerce Commission (ICC) issued your operating authority, if appropriate.
- 18. Enter your Dun & Bradstreet business number (used as a secondary identifier; if you do not have one, leave blank).
- 19. Enter the employer identification number (EIN#) or social security number (SSN#) assigned to your motor carrier operation by the Internal Revenue Service.
- 20. Enter the e-mail address for the official point of contact, if you have one.
- 21. Circle the appropriate type of operation classification. You may circle either Registrant, or up to one Carrier and one Shipper Operation.
 - Interstate (Carrier/Shipper) transportation of persons or property across State lines, including international boundaries, or wholly within one State as part of a through movement that originates or terminates in another State or country.
 - Intrastate (Hazmat Carrier, Non-Hazmat Carrier, Shipper) transportation of hazardous property wholly within the boundaries of a single State.
 - Registrant An entity who registers commercial motor vehicle with a State but does not operate as a motor carrier. For
 example, a company that is engaged solely in renting or leasing vehicles, or for-hire operator that always operated under the
 authority of another company.
- 22. Enter the carrier's total mileage to nearest 10,000 miles for the past calendar year, and the year of the mileage.
- 23. Circle appropriate classification. Circle ALL that apply. If "L. Other" is circled; enter the type of operation in the space provided.
 - a. Authorized for Hire transportation for compensation as common or contract carrier of property, owned by others, or passengers under the provision of the FMCSA.

- Exempt For Hire transportation for compensation of property or passengers exempt from the economic regulation by the FMCSA.
- c. Private Property means a person who provides transportation of property by commercial motor vehicle and is not a for-hire motor carrier.
- d. *Private Passengers (Business)* a private motor carrier engaged in the interstate transportation of passengers which is provided in the furtherance of a commercial enterprise and is not available to the public at large (e.g., bands)
- e. *Private Passengers (Non-Business)* a private motor carrier involved in the interstate transportation of passengers that does not otherwise meet the definition of a private motor carrier of passengers.
- f. *Migrant* interstate transportation, including a contract carrier, but not a common carrier of 3 or more migrant workers to or from their employment by any motor vehicle other than a passenger automobile or station wagon.
- g. U.S. Mail transportation of U.S. Mail under contract with the U.S. Postal Service.
- h. Federal Government transportation of property or passengers by a U.S. Federal Government agency.
- State Government transportation of property or passengers by a U.S. State Government agency.
- j. Local Government transportation of property or passengers by a local municipality.
- k. Indian Tribe transportation of property or passengers by an Indian tribal government.
- I. Other transportation of property or passengers by an operation classification not described above.
- 24. Circle all the letters of the types of cargo you usually transport. If "Other" is circled, enter the name of the commodity in the space provided.
- 25. Circle all types of hazardous materials (HM) you transport/ship. In the columns before the HM types, circle C for a carrier of HM and S for a shipper of HM. In the columns following the HM types, circle B if the HM is transported in bulk (over 119 gallons) and NB if the HM is transported in non-bulk (119 gallons or less). The HM types correspond to the classes and divisions listed in 49 CFR 173.2. Below are clarifications for the lettered codes:

A.	Div 1.1 Explosives (with mass explosion hazard)		Div 4.3 Dangerous when wet material
B.	Div 1.2 Explosives (with projection hazard)		Div 5.1 Oxidizer
C.	Div 1.3 Explosives (with predominantly fire hazard)	X.	Div 5.2 Organic Peroxide
D.	Div 1.4 Explosives (with no significant blast hazard)	Y.	Div 6.2 Infectious substance (Etiologic agent)
E.	Div 1.5 Very insensitive explosives; blasting agents	Z.	Div 6.1 A (Poison Liquid which is a PIH Zone A)
F.	Div 1.6 Extremely insensitive detonating substances	AA.	Div 6.1 B (Poison Liquid which is a PIH Zone B)
G.	Div 2.1 Flammable gas	BB.	Div 6.1 Poison (Poisonous liquid with no inhalation hazard.
H.	Div 2.1 LPG (Liquified Petroleum Gas)	CC.	Div 6.1 Solid (Meets the definition of a poisonous solid.
I.	Div 2.1 Methane Gas	DD.	Class 7 Radioactive materials.
J.	Div 2.2 Non-flammable compressed gas	EE.	HRCQ (Highway Route Controlled Quantity of Radioactive Material)
K.	Div 2.2 A (Anhydrous Ammonia)	FF.	Class 8 Corrosive material
L.	Div 2.3 A (Poison Gas which is Poison Inhalation Hazard (PIH)	GG	Class 8 A (Corrosive liquid which is a PIH Zone A)
	Zone A		, ,
M.	Div 2.3 B (Poison Gas which in PIH Zone B)	HH.	Class 8 B (Corrosive liquid which is a PIH Zone B)
N.	DIV 2.3 C (Poison Gas which is PIH Zone C)	II.	Class 9 Miscellaneous hazardous material
Ο.	DIV 2.3 D (Poison Gas which is PIH Zone D)		Elevated Temperature Material (Meets definition in 49 CFR 171.8 for
		JJ.	an elevated temperature material)
P.	Class 3 Flammable and combustible liquid	KK.	Infectious Waste (Meets definition in 49 CFR 171.8 for an infectious waste)
Q.	Class 3 A (Flammable liquid which is a PIH Zone A)	LL.	Marine Pollutants (Meets Definition in 49 CFR 171.8 for a marine
α.	Clade of the lamination inquire willow to a time 20110 fty		pollutant)
R.	Class 3 B (Flammable liquid which is a PIH Zone B)	MM.	Hazardous Sub (RQ) (Meets definition in 49 CFR 171.8 of a reportable quantity of a hazardous substance)
			Hazardous Waste (Meets definition in 49 CFR 171.8 of a hazardous
S.	Combustible Liquid (Refer to 49 CFR 173.20 (b))	NN.	waste)
T.	Div 4.1 Flammable Solid	00.	ORM (Meets definition in 49 CFR 171.8 of Other Regulated Material)
U.	Div 4.2 Spontaneously combustible material		

Note: Information on Poison Inhalation Hazards is found in column 7 of the Hazardous Materials table, (49 CFR 172.101).

- 26. Enter the total number of vehicles owned, term leased and trip leased, that are, or can be, operational the day this form is completed. Passenger vehicles are defined as:
 - Motor coach—a vehicle designed for long distance transportation of passengers, usually equipped with storage racks above
 the seats and a baggage hold beneath the passenger compartment.
 - School Bus—a vehicle designed and/or equipped mainly to carry primary and secondary students to and from school, usually built on a medium or large truck chassis.
 - *Mini-bus*—a motor vehicle designed or used to transport 16 or more passengers, including the driver, and typically built on a small truck chassis. A mini-bus has a smaller seating capacity than a motor coach.
 - Van—a small motor vehicle designed or used to transport 15 or fewer passengers, including the driver.
 - Limousine—a passenger vehicle usually built on a lengthened automobile chassis.
- 27. Enter the number of interstate/intrastate drivers used on an average work day. Part-time, casual, term leased, trip leased and company drivers are to be included. Also, enter the total number of drivers (Interstate/Intrastate) and the total number of drivers who have a Commercial Drivers License (CDL).
 - Interstate—driver transports people or property across State lines, including international boundaries, or wholly within one State as part of a through movement that originates or terminates in another State or country.
 - Intrastate—driver transports people or property wholly within one State.
 - 100-mile radius driver—driver operates only within a 100 air-mile radius of the normal work reporting location.
- 28. Enter U.S. DOT Number if your U.S. DOT Number registration revoked by the Federal Motor Carrier Safety Administration (FMCSA).
- 29. Enter Two (2) names of sole proprietor(s), officers or partners and titles.

- 30. Check the box or boxes that correspond to materials you transport. If you do not transport any of these materials, you do not need an HM Safety Permit.
- 31. Mark the "initial" box if you currently do NOT have an HM Safety Permit. If you currently hold an HM Safety Permit, check the "renewal" box.
- 32. If your company currently does not have a Federal U.S. DOT number, then enter the number of accidents as defined in 49 CFR 390.5 that your company has had in the past 365 days. The definition of "accident" in 49 CFR 390.5 is:
 - (1) Except as provided in paragraph 2 of this definition, an occurrence involving a commercial motor vehicle operating on a highway in interstate or intrastate commerce which results in:
 - (i) A fatality;
 - (ii) Bodily injury to a person who, as a result of the injury, immediately receives medical treatment away from the scene of the accident; or
 - (iii) One or more motor vehicles incurring disabling damage as a result of the accident, requiring the motor vehicle(s) to be transported away from the scene by a tow truck or other motor vehicle.
 - (2) The term accident does not include:
 - (i) An occurrence involving only boarding and alighting from a stationary motor vehicle; or
 - (ii) An occurrence involving only the loading or unloading of cargo."
- 33. Confirm that your company has a satisfactory security program in place as required in 49 CFR Part 385, subpart E.
- 34. If your company is required to have a STATE permit to transport any of the materials listed in question 30, answer yes. If you are not required to have a state permit, check no.
- 35. If you checked "yes" in question 34, then indicate, by checking the box next to the State abbreviation, the States that you have a permit for to transport the materials listed in question 30.
- 36. Print or type the name, in the space provided, of the individual authorized to sign documents on behalf of the entity listed in Block 1. That individual must sign, date, and show his or her title in the spaces provided (Certification Statement, see 49 CFR 390.19).